2017 NCQA PCMH STANDARDS

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PCMH REDESIGN- 2017 STANDARDS

6 PCMH Concepts within the standards

1. Team-Based Care and Practice Organization (TC).
2. **Knowing and Managing Your Patients (KM).**
3. Patient-Centered Access and Continuity (AC).
4. Care Management and Support (CM).
5. Care Coordination and Care Transitions (CC).
6. Performance Measurement and Quality Improvement (QI).

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ARE YOU READY TO DIG INTO CONCEPT 2?

CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

- Six competencies
- *10 Core Criteria (KM 01, 02, 03, 09,10,12,14,15, 20, 21,)*
- *18 Elective Criteria (KM 04, 05, 06, 07, 08,11, 13, 16, 17, 18, 19, 22, 23, 24, 25,26, 27, 28)*

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

Competency A: KM 01 - 08

- The practice routinely collects comprehensive data on patients to understand the background and health risks of patients.

- Practices use information on the population to implement needed interventions, tools, and supports for the practice as a whole and for specific individuals.

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS

KM-01 is a Core Criteria *(aligns with 2014 PCMH 3B Factor 1)*

Problem Lists: Documents an up-to-date problem list for each patient with current and active diagnoses.

Evidence:

- Report-shows patients with a problem list that has been updated at least annually. The problem list is a foundation for understanding health risks. OR

- KM-06-predominant conditions and health concerns which is a list of top priority conditions and concerns

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-02 is a Core Criteria *(aligns with 2014 3C Factors 2-8)*

Collects a comprehensive patient assessment that includes at least 9 areas.

Evidence *(Shared-Documented Process):*

- Documented process-describes the assessment areas such as patient and family medical and behavioral health history, social and cultural needs, preferences, etc., communication needs (language not included, unhealthy behaviors, cognition, social determinants of health, newborn screenings, advance care planning. Also describes the frequency of assessments and updated based on evidence-based guidelines.

 AND

- Evidence of implementation- completed assessments

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-03 is a Core Criteria *(aligns with 2014 3C Factor 9)*

The practice conducts depression screenings for adults and adolescents using a standardized tool

Evidence *(Shared-documented process):*

- Documented process –includes the screening process and approach for follow-up for positive screens

OR

- Report –screening rate and identifies the standardized screening tool

AND

Evidence of Implementation – Completed depression screens

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-04 is an Elective Criteria and is *New* for 2017

◉ 1 Credit

The practice conducts behavioral health screenings and/or assessments using a standardized tool for two or more of the 7 stated areas (e.g., anxiety, alcohol use disorder, etc.)

Evidence *(Shared-documented process only):*

◉ Documented process that specifies the types of assessments and identifies the standardized tool and how staff are trained on the use

AND

Evidence of Implementation – Completed assessments

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-05 is an Elective Criteria and is *New* for 2017

◉ 1 Credit

The practice assesses oral health needs and provides necessary services during the care visit based on evidence-based guidelines or coordinates with oral health partners.

Evidence *(Shared-documented process only):*

◉ Documented process that identifies the standardized tool and how staff are trained on the use.

AND

Evidence of Implementation – Completed assessment

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-O6 is an Elective Criteria and is *New* for 2017.

1 Credit

The practice identifies predominant conditions and health concerns of the patient population

Evidence:

- List of top priority conditions and concerns identified through an analysis or diagnosis codes or problem lists.

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-07 is an Elective Criteria and is *New* for 2017

- 2 Credits

The practice understands social determinants of health for patients, monitors at the population level and implements care interventions based on these data.

Evidence:

- Report –Routine collection of data on social determinants of health as required by KM-02.

AND

Evidence of Implementation –Examples of care interventions based on collection and monitoring of social determinants

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-08 is an Elective Criteria and is *New* for 2017

◉ 1 Credit

The practice evaluates patient population demographics/communication preferences/health literacy to tailor development and distribution of patient materials. Utilizes materials and media that are easy for patients to understand and use.

Evidence:

◉ Report – considers patient demographics such as age, language needs, ethnicity and education.

AND

Evidence of Implementation – Examples of patient materials

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

Competency B

The practice seeks to meet the needs of a diverse patient population by understanding the population's unique characteristics and language needs.

The practice uses the information to ensure linguistic and other patient needs are met.

KM-09 -11

14

CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-09 is a Core Criteria *(aligned with 2014 PCMH 2C Factor 1)*

The practice assesses the diversity (race, ethnicity, and one other aspect of diversity) of it's population.

Evidence*:*

⦿ Report – percentage of patients that fit the diversity criteria

15

CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-10 is a Core Criteria *(aligned with 2014 PCMH 2C Factor 2)*

The practice assesses the language needs of its population.

Evidence*:*

⦿ Report – identifies languages spoken by patients and the percent that speak each language

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-11 is an Elective Criteria and is *New* for 2017 (A and C are new)

◉ 1 Credit

The practice identifies and addresses population-level needs based on the diversity of the practice and the community (demonstrate at least two of three) A: Disparities of care and implements actions; B: Builds a health-literate organization; and C: Builds a culturally competent organization that educates staff on how to interact effectively with people of different cultures.

Evidence*: (Shared)*

◉ A: Evidence of Implementation

OR

A: QI 05 and A: QI O6

A: QI 13

B: Evidence of Implementation – Examples of training materials, processes, etc.

C: Evidence of Implementation – Examples of training materials, etc.

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

Competency C

The practice proactively addresses the care needs of the patient population to ensure needs are met.

KM-12 and KM-13

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-12 is a Core Criteria *(aligned with 2014 PCMH 3D Factors 1-4)*

The practice proactively and routinely identifies populations of patients and reminds them, or their families/caregivers about needed services (must report at least three categories) They are, A. preventive care services, B. Immunizations, C. Chronic or acute care services, and D. Patients not recently seen by the practice.

Evidence*: (Shared)*

⊙ A,B,D : Report and outreach materials

⊙ C: Reports/lists and outreach materials

OR

C: KM 13

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-13 is an Elective Criteria and is *New* for 2017

2 Credits

The practice demonstrates excellence in a benchmarked/performance-based recognition program assessed using evidence-based care guidelines. For example, NCQA HSRP or DRP recognition, Bridges to Excellence, etc.

Evidence*:*

Report – Clinical performance reports that are above national or regional averages.

OR

HSRP or DRP recognition for at least 75% of eligible clinicians.

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

Competency D

The practice addresses medication safety and adherence by providing information to the patient and establishing processes for medication documentation, reconciliation and assessment of barriers.

KM-14 - KM-19

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-14 is a Core Criteria *(aligned with 2014 PCMH 4C Factors 1 and 2)*

The practice reviews and reconciles medications for more than 80 percent of patients received from care transitions. Medication review and reconciliation occurs at transitions of care, or at least annually.

Evidence*:*

◉ Report – Percentage of patients with documented medication reconciliation or some report equivalent that includes a numerator and denominator.

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-15 is a Core Criteria *(aligned with 2014 PCMH 4C Factor 6)*

The practice maintains and up-to-date list of medications for more than 80 percent of patients

Evidence*:*

- Report – Percentage of patients with documented medication list or some report equivalent with a numerator and denominator.

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-16 is an Elective Criteria (*aligns with 2014 PCMH 4C Factors 3 and 4)*

1 Credit

The practice assesses understanding and provides education, as needed, on new prescriptions for more than 50 percent of patients/families/caregivers

Evidence*:*

Report –Percentage report

AND

Evidence of Implementation – examples of methods used to assess patient understanding and materials used. Patient education materials designed with regard to patient need.

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-17 is an Elective Criteria (*aligns with 2014 PCMH 4C Factor 5)*

1 Credit

The practice assesses and addresses patient responses to medications and barriers to adherence for more than 50 percent of patients, and dates the assessment.

Evidence*:*

Report –Percentage report

AND

Evidence of Implementation – Examples of assessments and addressing of known barriers in the patient record

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-18 is an Elective Criteria and is *New* for 2017

1 Credit

The practice assesses and addresses patient responses to medications and barriers to adherence for more than 50 percent of patients, and dates the assessment.

Evidence*: Shared*

Report –Percentage report

AND

Evidence of Implementation – Examples of assessments and addressing of known barriers in the patient record.

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-19 is an Elective Criteria and is *New* for 2017

2 Credits

The practice systematically obtains prescription claims data in order to assess and address medication adherence.

Evidence: *(Shared)*

Evidence of Implementation – Examples of claims data received to determine whether a patient is adhering to the medication treatment plan.

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

Competency E

The practice incorporates evidence-based clinical decision support across a variety of conditions to ensure effective and efficient care is provided to patients.

KM-20

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-20 is a Core Criteria *(aligned with 2014 PCMH 3E Factors 1-6)*

The practice implements clinical decision support following evidence-based guidelines for care. The practice must demonstrate at least 4 of 7 categories.

A. Mental Health condition
B. Substance disorder
C. Chronic medical condition
D. Acute condition
E. Condition related to an unhealthy behavior
F. Well child or adult care
G. Overuse/appropriateness issues

Evidence*: (Shared)*

◉ Identifies conditions, source of guidelines

AND

◉ Evidence of implementation – Examples (screenshots of EHR auto-alerts, flow diagrams, templates, etc)

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

Competency F

The practice identifies/considers and establishes connections to community resources to collaborate and direct patients to needed support.

KM-21 – KM 28

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-21 is a Core Criteria and is *New* for 2017.

The practice uses information on the population served by the practice to prioritize needed community resources.

Evidence*: (Shared)*

◉ List of key patient needs and concerns – assessed certain population information such as social determinants, predominant health conditions, utilization patterns and identifies and prioritizes community resources (e.g., food banks, support groups, etc) that support the identified needs.

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-22 is an Elective Criteria *(aligns with 2014 PCMH 4E Factors 2,3 and 5)*

1 Credit

The practice provides access to educational resources, such as materials, peer-supported sessions, group classes, online self-management tools, or programs.

Evidence*: (Shared)*

Evidence of Implementation – Examples of education materials, self-management tools, patient materials about how to access support groups, videos, etc., Suggest one or two examples for each category the practice wishes to evidence.

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-23 is an Elective Criteria and is *New* for 2017.

1 Credit

The practice provides oral health education resources to patients.

Evidence: *(Shared)*

Evidence of Implementation – Example of how the practice provides patients with educational and other resources that pertain to oral health and hygiene.

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-24 is an Elective Criteria *(aligns with 2014 PCMH 4E Factor 4)*.

1 Credit

The practice adopts shared decision-making aids for preference-sensitive conditions.

Evidence: *(Shared)*

Evidence of Implementation – At least 3 examples of shared decision-making aids that provide detailed information without advising patients to choose one option over another. For more information and resources: *International Patient Aid Decision Standards Collaboration (IPDASC)*

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-25 is an Elective Criteria and is *New* for 2017.

1 Credit

The practice engages with schools or intervention agencies in the community.

Evidence*: (Shared)*

Documented Process-describes the process for developing supportive partnerships with social service organizations or schools in the community.

AND

Evidence of Implementation – Examples of formal or informal agreements or identifies practice activities in which the community entities are engaged to support better health.

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-26 is an Elective Criteria *(aligns with 2014 PCMH 4E Factor 6).*

1 Credit

The practice routinely maintains a current community resource list based on the needs identified in KM-21.

Evidence*: (Shared)*

List of resources – The list must include at least 5 topics or community service areas of importance to the patient population.

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-27 is an Elective Criteria *(aligns with 2014 PCMH 4E Factor 7)*.

1 Credit

The practice assesses the usefulness of identified community resources.

Evidence*: (Shared)*

Evidence of implementation – Survey or focus group results and/or evidence of other patient feedback methods.

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CONCEPT 2: KNOWING AND MANAGING YOUR PATIENTS (KM)

KM-28 is an Elective Criteria and is *New* for 2017.

2 Credits

The practice has regular "case conferences" involving parties outside the practice team (e.g., community supports, specialists)

Evidence*: (Shared)*

Documented Process-describes the process for case conferences to share information and discuss care plans for high-risk patients.

AND

Evidence of Implementation – Examples of case conference notes. They should include participant names/titles.
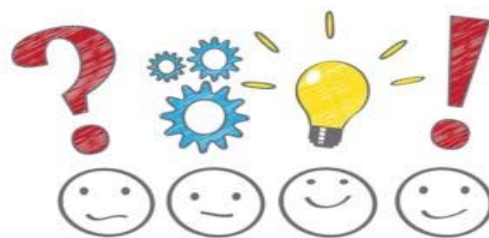
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NEXT WEBINAR

Concept 3:
Knowing and Managing Your Patients (KM)

Thursday April 26, 2018 from 1PM – 2PM Central

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QUESTIONS?

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